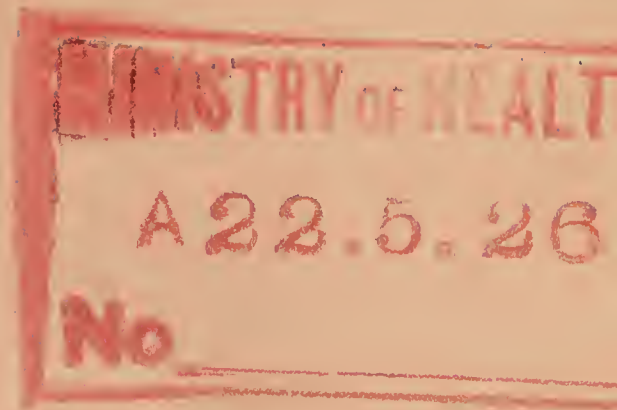


Library E



TETTENHALL URBAN DISTRICT COUNCIL

Medical Officer of Health's

REPORT


FOR 1925

FORTY-THIRD ANNUAL REPORT





TETTERTON URBAN DISTRICT COUNCIL
Medical Officer of Health's
REPORT
FOR 1925
FORTY-THIRD ANNUAL REPORT



Digitized by the Internet Archive
in 2018 with funding from
Wellcome Library

<https://archive.org/details/b30182220>

TETTENHALL URBAN DISTRICT COUNCIL.

Medical Officer of Health's Report for 1925

43rd ANNUAL REPORT.

Tettenhall Local Board Constituted	...	...	1883
Population Census, 1891	...	...	5415
,, ,, 1901	...	...	5337
,, ,, 1911	...	...	5381
,, ,, 1921	...	...	5488
Inhabited Houses, 1891	...	...	1056
,, ,, 1901	...	...	1176
,, ,, 1911	...	...	1225
,, ,, 1921	...	...	1360
Area in Statute Acres	...	...	1531
Adoption of Bye-Laws	...	...	1887
,, ,, Dairies, Cowsheds and Milkshops			
Order	...	...	1887
,, ,, Notification Act	...	...	1889
,, ,, Infectious Diseases Prevention Act			
(the whole)	...	...	1891
Sewerage Works commenced 1890, finished	...		1892
Isolation Hospital Provided	...	...	1891
Public Health Acts' Amendment Act, 1890 (the			
whole)	...	...	1891
Public Scavenging undertaken	...	...	1897
Conversion of Sewerage Treatment	...	...	1900
Joint Small Pox Hospital Provided	...	...	1903
Special Committee to deal with Middens	...		1907
Extension of Sewerage Farm	...	...	1910
Adoption of Notification of Phthisis	...	...
,, ,, ,, Ophthalmia Neonatorum			
,, ,, ,, Poliomyelitis and Cerebro			
Spinal Fever	...		1912
Adoption of Public Health Acts' Amendment Act,			
1907 (parts)	...	...	1912
Shops' Act, 1912 (Council to act as Agents for			
County Council)	...	...	1912
Health Visitor appointed	...	...	1915
Maternity and Child Welfare	...	...	1916
Measles and Whooping Cough	...	...	1916
Notification of Births Act	...	...	1916
Ministry of Health, 1st July	...	...	1919
Wolverhampton Extension Bill withdrawn, June			1922
Bye-Laws, New Streets and Buildings	...	...	1925

MEDICAL OFFICER OF HEALTH'S REPORT FOR 1925.

To the Chairman and Members of the District Council.

MR. CHAIRMAN AND GENTLEMEN,

This is my 43rd Annual Report and, by the direction of the Ministry, is a survey for 5 years, and will necessarily contain some repetition of matter in previous reports.

Tettenhall is part of the green borderland of the Black Country. It is agricultural and a residential district, favoured on account of its natural beauties and its social amenities. There is a fine golf course, a cricket ground where County Matches are played, and two village greens.

There is a Parish Room and a Village Institute and Club at Tettenhall, and a fine Parish Room at Compton, which are available for the entertainment of various classes of Society.

Several well-kept hostelries, with bowling greens, invite artizans and shopkeepers to spend a pleasant evening, and there are inns for the labouring man to discuss the crops and weather and the high price of beer.

The ancient Church of St. Michael and All Angels diverts the piety of our neighbours from their Mother Church on Sundays and festivals. St. Michael's has a beautiful churchyard with fine yews, and one of its tombstones records the case of a woman who lost her hands by working on Sundays.

It is said of the people of the Black Country that money is their god and Tettenhall their heaven, and it is their ambition to end their days in more attractive surroundings than Bilston or Tipton or Willenhall. Thereby these mature immigrants contribute to the death rate of the natural inhabitants.

It is quite natural that the neighbouring County Borough should desire to absorb such an attractive district and the Town Clerk has said "I will give thee Naboths vineyard," but the people of Tettenhall object. Their district is so economically and efficiently administered that they have no wish to change King Log for King Stork.

Their officials have served them for many years and have personal knowledge of their wants. Their Medical Officer of Health was appointed in 1883, their Sanitary Inspector in

1909, and their Health Visitor in 1915. Their Rate Collector was born at Tettenhall and has served the Council in various capacities since 1897.

The area of Tettenhall is 1,531 acres.

The population at the census of 1921 was 5,488 and is now estimated by the Registrar General at 5,460. In December, 1925, there were 1,413 houses.

The Rateable value is £31,830.

The Rates are 12/2 in the pound.

A Penny Rate yields £123 3s. 0d.

VITAL STATISTICS (TABLE I.)

Taking the population as 5,460, the Birth Rate for 1925 is 15.5 and the Death Rate 11.5, there being 85 Births and 64 Deaths. There were 6 Infant Deaths, with an Infant Mortality of 70.5.

POOR LAW RELIEF.

The amount of Poor Law Relief in the Parish of Tettenhall for the year ending 31st March, 1925, was £733.

Out-door Relief to unemployed in 1922 was £40 5s. 3d., in 1923 £11 6s. 7d., in 1924 £9 15s. 3d., in 1925 15s. 1½d.

The Widows' and Orphans' Pensions, which came into operation in January, 1926, have somewhat reduced the relief.

The people of Tettenhall are occupied in trade and agriculture. Forty per cent. of the working classes find employment in Wolverhampton and some go to neighbouring towns even so far as Birmingham.

HOSPITALS.

The Council contribute to the Borough Infectious Hospital for Scarlet Fever by payment for beds and maintenance, and to the Wolverhampton and Staffordshire Hospital for maintenance of Diphtheria. There is an agreement with the District Nurses' Home to take in urgent Midwifery cases.

Small Pox and the institutional treatment of Tuberculosis is provided for by the respective Conjoint Boards.

Hospitals available through recommendation are the Wolverhampton and Staffordshire Hospital, the Women's Hospital and the Eye Infirmary.

AMBULANCES.

The Borough Infectious Hospital and the General Hospital.

LABORATORY WORK.

Only specimens bearing on Public Health are sent to the County Bacteriologist, Dr. Menton, whose Laboratory has been moved to Wissage, Trent Valley Road, Lichfield.

The Council pays for Diphtheria antitoxin.

PUBLIC HEALTH STAFF.

The Medical Officer of Health (part time) has served the Council for 43 years.

The Surveyor, who is also Sanitary Inspector, gives his whole time. He is a Member of the Institute of Municipal and County Engineers and an Associate of the Royal Sanitary Institute, and was appointed in 1909.

The Health Visitor (whole time) was appointed in 1915. She had 13 years' experience as Medical, Surgical and Maternity Sister, and has the C.M.B. She is also School and Tuberculosis Nurse.

Surveyor's Assistant (whole time), 5 years.

A Lady Clerk (whole time), 7 years.

The Health Visitor nurses cases of Measles under 5, and there have been no deaths from Measles for over 10 years. There is a Parish Nurse, supported by voluntary contributions, and a Midwife, subsidised by the County Council. Five Midwives practice in the District, and the Nurses from the District Home have an excellent reputation in attending confinements.

NOTIFICATION OF BIRTHS (EXTENSION) ACT, 1915.

Before the Act became operative (1st September, 1915) my Council formulated a scheme for the provision of a Maternity and Child Welfare Centre which was approved by the Local Government Board. By anticipating the County Council we have co-ordinated the work of the District and saved a great deal of money, and control our own Clinic.

This Clinic is held on Fridays and a School Clinic on Tuesdays.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER.

The Corporation of Wolverhampton obtain from deep wells in the Council's District a large portion of the water which they supply and retail to consumers in the district.

The supply is constant and satisfactory except in a few cases, where there are stand-pipes. There are 1,413 houses in the district, of which 1,374 are provided with a piped supply.

RIVERS AND STREAMS.

The Smestow, which is a tributary of the Stour, drains into the Severn, has recently been much discoloured from excavations since new works have been erected in Wolverhampton. The tributaries of the Trent, which rise in our district, are insignificant. There are 21 potable wells.

DRAINAGE AND SEWERAGE.

The Council possess adequate and efficient works for the disposal of the Sewage of their district at Blackbrook—4 miles from Tettenhall—to which the greater portion of the district naturally drains.

ROADS.

There are 15.41 miles of Road in the area of the district, of which 3.42 are Class 1 Main Roads, 1.67 miles Class 2 District Roads, and 10.32 not classified. All the roads are maintained by the Council, the County Council contributing to the maintenance of Class 1 Roads.

SCAVENGING.

The removal of House Refuse is carried out by the Council by direct labour under the supervision of the Sanitary Inspector. The Council own horses, carts and motor vehicles.

CLOSET ACCOMMODATION.

There are 1,686 Water Closets and 123 Privies. 17 Privy Middens were converted to W.C's in 1925.

SANITARY INSPECTION OF AREA.

Smoke abatement. There is only one large chimney in the district. This belongs to the Wolverhampton Waterworks. When working at high pressure in dry seasons, complaints have been made of nuisance arising therefrom.

MEAT.

The Council have appointed the Sanitary Inspector as Meat Inspector. The inspection of Meat is systematically carried out. Three carcasses were found to be unfit for food and destroyed.

There are 3 registered and 2 licensed slaughter-houses.

BAKEHOUSES.

There are 4 Bakehouses, none underground.

MILK.

There is a cheap and abundant supply of Milk available in the district. The Council have no application for the supply of milk to necessitous mothers and children.

HOUSING STATISTICS FOR THE YEAR 1925.

Number of New Houses erected during the year:

(a) Total (including numbers given separately under (b) 9

(b) With State assistance under the Housing Acts:

(i) By the Local Authority nil

(ii) By other bodies or persons

1. *Unfit Dwelling Houses.*

Inspection—(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts) 444

(2) Number of dwelling houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations 1925 ... 56

(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation 4

(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation 42

2. *Remedy of Defects without service of formal Notices.*

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers 42

3. *Action under Statutory Powers.*

A.—Proceedings under Section 3 of the Housing Act, 1925.

(1) Number of dwelling houses in respect of which notices were served requiring repairs nil

(2) Number of dwelling houses which were rendered fit after service of formal notices:

(a) By Owners nil

(b) By Local Authority in default of Owners nil

(3) Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by Owners of intention to close	nil
---	-----

B.—Proceedings under Public Health Acts.

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	18
---	----

(2) Number of dwelling houses in which defects were remedied after service of formal notices :	
--	--

(a) By Owners	18
----------------------	----

(b) By Local Authority in default of Owners	nil
--	-----

C.—Proceedings under Sections 11, 14 and 15 of the Housing Act, 1925.

(1) Number of representations made with a view to the making of Closing Orders	nil
---	-----

(2) Number of dwelling houses in respect of which Closing Orders were made	nil
---	-----

(3) Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit	nil
---	-----

(4) Number of dwelling houses in respect of which Demolition Orders were made	nil
--	-----

(5) Number of dwelling houses demolished in pursuance of Demolition Orders	nil
---	-----

PREVALENCE OF INFECTIOUS DISEASE FROM 1920 to 1925.

During the 6 years under review there have been 69 cases of Scarlet Fever, 24 of Diphtheria, 57 of Pneumonia, 4 of Puerperal Fever, 38 of Pulmonary and 9 of Non-Pulmonary Tuberculosis.

Of the 69 cases of Scarlet Fever, 50 were sent to the Hospital, and 19 treated at home. Two died. There were 3 return cases.

Nasal and aural discharges appear to be more frequent in cases treated at Hospital than in those nursed at home. In 1921 there were 35 cases of which only 25 were sent to Hospital, owing to congestion of beds. Of the 25 treated in Hospital 3 were return cases with discharge from the ear or

nose. In the 10 cases treated at home there was no mucus discharge, and although there was overcrowding in several instances, there was no extension of the disease.

The Medical Officer of Health attended those families who were unable to pay for a doctor, as he frequently does, and has come to the conclusion that Scarlet Fever is only infectious in the early stages of the disease or when mucus discharges are established. In deference to opinion he has desquamating children rubbed with carbolized vaseline, but his belief is that dry peeling skin is innocuous. This is the substance of my reply to the special enquiries from the Ministry of Health in 1924.

One case was sent to the Hospital, and after careful investigation Dr. Jolly discharged the case as negative.

DIPHTHERIA.

From 1920-1925 there were 24 notifications, 13 were sent to Hospital, 11 treated at home, and 4 Deaths. Death was generally due to the child not having antitoxin early, and I urge on my colleagues the immediate administration of a big dose to the patient and smaller doses to contacts, especially those nursing the sick. The contacts are protected for the moment, even if they become more susceptible in a few weeks,

Of the 24 notifications for Diphtheria, 4 were bacteriologically negative, although one was detained in Hospital for 19 days, the Physician saying it was clinically Diphtheria, though the Pathologist could not find the germ. A Nurse living in Tettenhall contracted Diphtheria at the Walsall Infectious Hospital and was treated at home.

PNEUMONIA.

Pneumonia was most prevalent in 1922 and 1924. There were 57 notifications and 27 deaths. One death, an infant, was caused by Pneumonia following Whooping Cough. Another death occurred in a T.B. case that had Sanatorium treatment and had apparently recovered. Most of the other deaths were Influenzal.

ENTERIC.

Two cases were notified, but in both several Widal's tests were negative.

ENCEPHALITIS LETHARGICA.

There were 4 cases with 2 deaths. Full reports of each case were sent to the Ministry at the time. The first

case was taken ill in 1921 with diarrhœa and sickness. On the third day she had a stroke and lost her speech and was removed to the Hospital, where she died. In 1924 a patient was sent to the Eye Infirmary by her doctor for a squint. A few days later she was admitted to the General Hospital with marked Encephalitis and recovered. In the same year a Plumber went to sleep at his work. He had double vision, pains in the back of the head, squint and twitching of the left eye. He was treated at home and recovered. The last case was in 1925. She had pains in head and vomiting, difficulty in swallowing, loss of speech and vision, and ultimately became hemiplegic. She died at home.

OPHTHALMIA NEONATORUM.

Four cases were notified, 2 treated at the Eye Infirmary. They all recovered with undamaged sight.

PULMONARY TUBERCULOSIS.

38 cases were notified in 6 years. There were 13 deaths, 2 at Sanatoria. Of the 38 notifications, 10 were discharged soldiers, 3 of whom are dead.

Of the 38 cases, 13 are dead, 10 have left the district, 9 are reported well, and 6 remain on the official list.

There are 2 shelters in the district. Twenty out of the 38 notified cases had Sanatoria Treatment, and 19 have been examined from time to time by the Medical Officer of Health.

NON-PULMONARY—(9).

Two died, one from Tubercular Meningitis, and one from Tubercle of Larynx. Two have left the district, 4 discharged by the Tuberculosis Officer, and one remains on the list.

On the death or removal of Tuberculosis patients, the room is disinfected, and in some cases the bedding destroyed. Sputum flasks are in better use.

On March 19th, 1926, there were 11 patients on the official list, 10 Pulmonary and one Non-Pulmonary. Mrs. Bassage has consented to act on the After-Care Committee. Pathological and Bacteriological specimens are examined by

Dr. Menton, and in some cases by Dr. Hewison, and full use is made of their services. Contacts are examined by the Medical Officer of Health when there is no doctor in attendance. Isolation is often impossible except by removal to Hospital, but is carried out as far as practicable.

Disinfection is regularly carried out on the death or removal of patients with Notifiable Diseases. This is also done in cases of Cancer and long standing illness. The Schink and Dick tests have not been used. Diphtheria contacts have prophylactic doses of Antitoxin, which at any rate protects them for the time being.

In 1922 the Medical Officer of Health spoke to the children in the Schools on Small Pox, and a great impetus was given to vaccination, Drs. Cooke and McTurk, the Public Vaccinators, reporting that up to December they had performed 317 satisfactory vaccinations in the district. At this time the Medical Officer of Health re-vaccinated the Staff and several adults who were sent to him by school children, who for a time carried out an enthusiastic propaganda for vaccination.

There were 4 cases of Puerperal Fever during 6 years. Two cases came into the district to be confined (one of an illegitimate child). An expectant mother who had albuminuria had Puerperal Fever after confinement and was sent to Hospital in 1920. The same woman had Diphtheria in 1925 and was the case in which the Physician and Pathologist could not agree. She was intolerant of serums and had a violent rash and was very ill after Antitoxin. Her son, aged 5, was sent to the Infectious Hospital with Scarlet Fever a few days after the mother's removal to the General Hospital. This case has been under observation at the Clinic since 1920.

Only one case of Malaria was notified since 1920.

CANCER.

In 1923 my Council wished to make Cancer a notifiable disease so that their officials might have control over the disinfection of discharges, but as it was authoritatively stated that there was "no evidence to show that malignant disease is at all infectious" the matter was dropped, but a circular issued by the County Council has been circulated.

Of the non-notifiable Infectious Diseases there were 114 cases of Measles (57 under 5, nursed by the Health Visitor), 26 cases of Mumps, 15 of Whooping Cough, and 9 of Chicken Pox. There was one death from Pneumonia supervening on Whooping Cough. We are fully informed of these through the frequent visits of the Health Visitor to Schools.

MATERNITY AND CHILD WELFARE, 1925.

BIRTHS.

Seventy-seven Births, of which 4 were Stillborn, were notified. Forty-one were attended by Doctors and 36 by Midwives. Three Births were illegitimate. .

The Health Visitor has a list of 11 mothers who were confined outside the district. Some she has visited as expectant mothers and others on their return to the district from Maternity Homes. These births are credited to other areas and lower our Birth Rate, while any of these babies dying on their return to the district add to our Infant Mortality. One infant born elsewhere was brought back in a dying condition and only lived two days.

Notification of Births:

Notified by Doctors	9
Notified by Midwives	58
Notified by Registrar	3
Particulars obtained by Health Visitor	7
	<hr/>
	77

A notice was sent to 19 Doctors and 6 Midwives practising in the district reminding them that notification was a Statutory Duty. At the same time they were supplied with a fresh stock of notification cards.

Vaccination in the district is unsatisfactory. Of 77 babies born 38 are vaccinated, 24 claim exemption, 4 are dead, 4 stillborn, 5 not yet vaccinated, and 2 have left the district.

There were 6 deaths under 1 year.

A.—6 days. (1) Premature Birth; (2) Gastric Hæmorrhage and Exhaustion.

B.—10 months. Pneumonia following Whooping Cough.

C.—8 hours. Congenital Heart Disease.

D.—14 days. Premature Twin Birth.

E.—16 hours. Premature Birth and Cardiac Failure.

F.—3 months. Gastritis; Convulsions.

ATTENDANCE AT CLINIC, 1925.

Of the 72 babies born in 1924, 18 were brought to the Clinic during 1925; 6 were breast fed, 2 breast and bottle, and 10 were weaned. Of the 77 babies born in 1925, 32 attended the Clinic; 25 were breast fed, 5 breast and bottle, and 2 bottle = $32 + 18 = 50$.

4 babies were circumcised.

3 cases of Umbilical Hernia, cured with belts.

1 case of Nystagmus and head nodding is now well

4 cases of Diarrhœa.

8 cases of Bronchitis.

6 suffered from irregular and improper feeding.

The remaining 24 babies were in good health.

CHILDREN 1 TO 5 YEARS.—64 attended the Clinic.

2 cases of Tonsils and Adenoids (both operated on).

1 „ „ Dermoid Tumour.

1 „ „ Tubercular Abscess (drained).

4 „ „ Otitis Media. All cured by instillations of Hydrogen Peroxide and Spirit.

8 „ „ Bronchitis

8 „ „ Influenza.

3 „ „ Gastritis.

1 „ „ Conjunctivitis and Squint. To Eye Infirmary.

7 „ „ Tonsilitis. Treated with Iron and Chlorine Water.

4 „ „ Blepharitis. Alleviated.

2 „ „ Jaundice. Cured.

2 „ „ Worms. Cured.

1 „ „ Rickets. Much improved.

6 „ „ Skin Disease, including Ringworm, Impetigo and Eczema.

2 backward children were treated with Thyroid.

12 were quite well.

EXPECTANT AND NURSING MOTHERS.

Of the 54 mothers who attended the Clinic—

13 were Expectant.

38 Nursing Mothers of these 54.

2 had Teeth extracted, and 1 Radiograph of mouth taken.

3 had Tonsilitis.

6 had Bronchitis.

1 had Rheumatism.

3 had no milk.

SCHOOL CHILDREN—72 attended the Clinic.

6 had Tonsils and Adenoids. Removed.

6 Otitis Media.

- 2 Glands (one from Infection and 1 Tubercular).
- 1 Tuberculous Abscess (opened).
- 1 Teeth extracted.
- 5 Tonsillitis. Treated with Iron and Chlorine.
- 1 Dacryocystitis. Sent to Eye Infirmary.
- 1 Conjunctivitis, Defective Vision. Sent to Eye Infirmary.
- 2 Chorea (one child sent to Rhyl Convalescent Home).
- 2 Nasal Catarrh. Treated with normal saline.
- 6 Bronchitis and Influenza.
- 2 Debility and 2 Anorexia.
- 4 Colic.
- 1 Eneurisis. No better.
- 2 Worms.
- 1 Sonambulist—kept from School. Better.
- 10 Minor Ailments, e.g., Septic Fingers and Toes, Chilblains.
- 7 Coughs and Colds.
- 10 Skin Trouble, including Ringworm, Impetigo, Scabies, Psoriasis.

SPECIAL CASES—12 Adults.

- 1 Epilepsy. Cured. (No fit for two years.)
- 5 Bronchitis.
- 1 Anæmia.
- 2 Old T.B. Both apparently well.
- 1 Heart case. Much better.
- 1 Prolapsus Uteri. Cured.
- 1 Neurasthenia.

DENTAL CLINIC.

Two Expectant Mothers had their teeth extracted.

Mr. Hipkins, our Dentist, very kindly charges reduced fees to School Children whom I send him.

SCHOOLS.

There are two Elementary Schools in the district, the Tettenhall and Tettenhall Wood Church of England Schools.

The TETTENHALL SCHOOLS were cleaned and painted in 1924, and look fresh and sanitary.

There is accommodation for 201 Girls, 248 Boys and 184 Infants—633.

There are two lavatory basins for the girls, 4 for the boys and two for the infants, who also have a portable bowl.

There are 10 Closets which are flushed from a cistern, and 8 Urinals flushed from a tap.

The sanitary condition is better than in 1923. (Report 1923—p.11.)

TETTENHALL WOOD SCHOOLS.

In the Mixed Department there is accommodation for 346 boys and girls, and in the Infants 144—490.

In the Mixed Department there are 6 flush trough Closets for the girls and 4 for the boys, and a Urinal.

The boys have 4 wash-bowls, the girls 4, Infants 3.

In A, B and C rooms the floors are rotten in places, with projecting nails. D and E have block floors.

In the Infant Department there are 4 W.C's for girls and 3 for boys, and a Urinal. In the Main Room the floor needs repair, but the Class Room has a good block floor.

In the district there is accommodation for 1,123 School Children, with an attendance of about 723.

There is a large playground at Tettenhall, it has an ash surface, whereby dirt is carried into the School. The playground at Tettenhall Wood is muddy, but the paths are better paved. Here the children seem to play principally in the road where there is little traffic.

With regard to the incidence of disease. There were 6 cases of Scarlet Fever at the Tettenhall Schools, Measles and Chicken Pox in February and March and Mumps in May and June, the latter ailments being in the Infants' School. There were two deaths of School Children, one from Osteomyelitis and the other from Malignant Scarlet Fever.

At Tettenhall Wood there were Measles in March and October. The Infant School was closed for disinfection from 14th to 18th October with the approval of the County School Medical Officer. When I visited the School on October 20th. there were 51 children present out of the roll of 109. In this outbreak 36 children over 5 and 18 under 5 years (54) had Measles between 28th September and 19th October, not counting children attending the Tettenhall Wood School who live outside the district.

The majority of mothers make no attempt at isolation in spite of the constant exhortations of the Health Visitor, although it must be admitted that isolation after the rash appears has little effect.

Dr. Anderson, the County Deputy School Medical Officer, visited Tettenhall on January 14th and June 9th, in reference to School work.

In deference to his wishes, my Council authorised me to hold a School Clinic on Tuesdays, under the supervision of the Health Visitor, who refers special cases to me. This was commenced on the 10th March, and I find that I have given 155 attendances to School children and the Health Visitor 560.

No contribution beyond the dressings is made by the Education Committee, and, with the consent of the Council, your officials give their services voluntarily.

VISITS BY THE HEALTH VISITOR AS SCHOOL NURSE.

Major Ailments	Eyes	Minor Ailments	Verminous Children	Schools	School Clinic
588	58	321	491	96	560

The Health Visitor made the following visits during the year :—

To Expectant Mothers	...	133	
„ Births	... ..	1,547	
			1,680
„ Schools	... ..	96	
„ School Children	... ..	1,258	
			1,354
„ Diphtheria	... ..	2	
„ Scarlet Fever	... ..	31	
„ Encephalitis Lethargica		2	
„ Ophthalmia Neonatorum		4	
„ Tuberculosis	... ..	211	
„ Influenza—105 cases	... ..	62	
„ Measles	... ..	127	
„ Whooping Cough	... ..	24	
„ Chicken Pox	... ..	11	
„ Mumps	... ..	27	
			501
Total	...		3,535

In deference to the Memorandum issued by the Ministry of Health and the Board of Education, there has only been one short School Closure. Falling attendances without closure have given dissatisfaction to teachers, who think their salaries are affected. but I have referred the matter to Stafford, and Dr. Anderson assures me that “provision is made to prevent loss of grant through fall of attendance due to the incidence of Infectious Disease.”

I am, Mr. Chairman and Gentlemen,

Your obedient Servant,

W. H. T. WINTER,

Medical Officer of Health.

APRIL, 1926.

TABLE I.

TETTENHALL URBAN DISTRICT.

Causes of Death in 1925.

CAUSES OF DEATH						MALES	FEMALES
ALL CAUSES	...	...	...	...	...	32	32
Scarlet Fever	...	...	...	...	...	—	1
Whooping Cough	...	...	...	...	...	—	1
Encephalitis Lethargica	...	...	...	...	...	—	1
Tuberculosis of Respiratory System	...	...	...	...	...	1	4
Cancer, Malignant Disease	...	...	...	...	...	5	3
Cerebral Hæmorrhage, etc.	...	...	...	...	...	1	1
Heart Disease	...	...	...	...	...	8	13
Bronchitis	...	...	...	...	...	—	1
Pneumonia (all forms)	...	...	...	...	...	3	—
Other Respiratory Diseases	...	...	...	...	...	2	—
Ulcer of Stomach or Duodenum	...	...	...	...	...	1	—
Appendicitis and Typhlitis	...	...	...	...	...	1	—
Acute and Chronic Nephritis	...	...	...	...	...	—	1
Other Accidents and Diseases of Pregnancy and Parturition	...	...	...	...	...	—	1
Congenital Debility and Malformation, premature birth	...	...	...	...	...	3	1
Other Deaths from Violence	...	...	...	...	...	1	1
Other Defined Diseases	...	...	...	...	...	6	3
Causes ill-defined or unknown	...	...	...	...	...	1	1
Deaths of Infants under 1 year—Total	...	...	...	...	...	3	3
Illegitimate	...	...	...	...	...	—	—
Total Births	...	...	...	...	...	37	48
Legitimate	...	...	...	...	...	36	46
Illegitimate	...	...	...	...	...	1	2
POPULATION	...	...	...	...	...		5,460

GENERAL REGISTER OFFICE,

SOMERSET HOUSE,

LONDON, W.C. 2.

MARCH, 1926.

TABLE II.
TABLE OF NOTIFIABLE DISEASES DURING 1925.

Disease.					Total Cases Notified.	Cases admitted to Hospital.	Total Deaths.
Small Pox	...	...	...	...	—	—	—
Scarlet Fever	...	...	...	...	14	13	1
Diphtheria	...	...	...	...	3	2	—
Enteric Fever (Including Paratyphoid)					—	—	—
Puerperal Fever...	...	...	...	...	—	—	—
Pneumonia	...	...	...	...	5	1	2
Other Diseases generally notifiable							
Encephalitis Lethargica			...	...	1	—	1
Other Diseases notifiable locally							
Erysipelas			...	...	1	—	—

TABLE III.
TABLE OF PULMONARY TUBERCULOSIS in 1925.

Age-Periods.				New Cases.				Deaths.			
				Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
				M.	F.	M.	F.	M.	F.	M.	F.
15	...	...	...	1	—	—	—	—	—	—	—
20	...	..	...	—	—	—	—	—	—	—	—
25	...	...	...	—	—	—	—	—	—	—	—
35	...	...	...	—	2	—	—	—	2	—	—
45	...	...	...	1	—	—	—	—	—	—	—
55	...	.	...	—	—	—	—	—	—	—	—
65 and upwards	...		...	—	—	—	—	—	—	—	—
Totals	...		...	2	2	—	—	—	2	—	—

TABLE IV.

TETTENHALL URBAN DISTRICT COUNCIL.

Notifiable Diseases from 1893 to 1924.

	SMALL- POX		SCARLET FEVER		DIPH- THERIA		TY- PHOID		PUERP. FEVER		MEAS- LES		EPID. INFL.		PNEU.	
Year	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
1883	—	—	5	—	1	—	—	—	—	—	—	—	—	—	—	—
1884	7	1	6	—	—	—	1	—	—	—	XX	2	—	—	—	—
1885	—	—	—	—	—	—	1	—	—	—	5	—	—	—	—	—
1886	—	—	—	—	1	1	1	—	—	—	115	5	—	—	—	—
1887	—	—	1	1	1	—	8	3	—	—	34	5	—	—	—	—
1888	—	—	2	—	—	—	1	—	—	—	—	—	—	—	—	—
1889	—	—	—	—	—	—	—	—	—	—	49	3	XX	—	—	—
1890	—	—	16	1	—	—	3	—	—	—	86	1	XX	—	—	—
1891	—	—	17	—	—	—	3	1	1	—	X	1	XX	—	—	—
1892	—	—	14	—	6	2	6	—	1	—	3	—	X	—	—	—
1893	1	—	29	—	1	—	6	—	—	—	—	—	—	—	—	—
1894	—	—	46	3	12	5	2	1	1	1	40	3	—	—	—	—
1895	—	—	24	1	60	15	2	—	1	—	—	—	X	3	—	—
1896	—	—	50	2	40	4	1	—	—	—	—	—	X	1	—	—
1897	—	—	9	—	6	—	1	—	—	—	—	—	—	—	—	—
1898	—	—	11	2	1	—	3	—	—	—	230	8	X	—	—	—
1899	—	—	5	—	1	—	3	2	—	—	34	—	XX	—	—	—
1900	—	—	14	—	5	—	4	—	—	—	10	—	XX	1	—	—
1901	—	—	11	1	28	1	3	—	1	1	66	—	X	1	—	—
1902	—	—	57	1	13	—	—	—	—	—	2	—	—	—	—	—
1903	—	—	37	1	1	—	—	—	—	—	155	5	—	—	—	—
1904	—	—	43	—	2	—	—	—	—	—	7	—	—	—	—	—
1905	—	—	23	—	3	—	—	—	—	—	—	—	—	2	—	—
1906	—	—	53	1	8	—	—	—	1	—	6	—	X	4	—	—
1907	—	—	63	1	7	1	—	—	1	1	68	—	—	—	—	—
1908	—	—	19	—	3	—	—	—	—	—	4	—	X	1	—	—
1909	—	—	9	—	7	—	—	—	—	—	3	—	—	—	—	—
1910	—	—	44	—	7	1	1	—	—	—	—	—	—	—	—	—
1911	—	—	13	—	6	—	—	—	1	—	25	1	—	—	—	—
1912	—	—	3	—	2	1	1	1	—	—	XX	—	X	2	—	—
1913	—	—	18	—	5	—	—	—	—	—	X	2	X	1	—	—
1914	—	—	15	2	7	1	—	—	—	—	30	—	X	1	—	—
1915	—	—	1	1	—	—	—	—	—	—	7	1	X	—	—	—
1916	—	—	—	—	3	—	—	—	1	—	52	—	—	2	—	4
1917	—	—	2	—	2	—	—	—	—	—	142	—	—	5	—	3
1918	—	—	—	—	—	—	—	—	—	1	130	—	XXX	10	—	2
1919	—	—	6	—	2	—	—	—	—	—	96	—	XXX	10	5	2
1920	—	—	5	—	3	1	—	—	3	—	56	—	—	3	1	3
1921	—	—	35	—	2	—	—	—	—	—	4	—	—	—	—	7
1922	—	—	9	1	1	—	—	—	1	—	8	—	X	4	22	8
1923	—	—	4	—	—	—	1	—	—	—	61	—	—	—	7	1
1924	—	—	2	—	15	3	—	—	—	—	67	—	173	3	22	6
1925	—	—	14	1	3	—	—	—	—	—	114	—	—	—	5	2

TABLE IV.—*Continued.*

Year	W. COUGH		TUBERC. PULMON.		TUBERC. O. FORM		MAL- ARIA		ERYSIP.		ENCEHP. ALITIS LETHAR- GICA		OPHTHAL.	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
1883	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1884	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1885	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1886	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1887	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1888	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1889	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1890	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1891	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1892	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1893	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1894	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1895	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1896	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1897	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1898	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1899	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1900	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1901	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1902	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1903	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1904	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1905	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1906	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1907	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1908	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1909	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1910	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1911	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1912	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1913	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1914	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1915	—	—	9	3	9	—	—	—	—	—	—	—	—	—
1916	9	—	14	7	3	4	—	—	—	—	—	—	1	—
1917	20	2	6	2	2	2	—	—	—	—	—	—	—	—
1918	46	2	4	8	6	2	—	—	2	—	—	—	2	—
1919	5	—	7	2	1	—	2	—	2	—	—	—	—	—
1920	—	—	13	—	1	1	—	—	3	—	—	—	—	—
1921	9	—	7	—	4	—	—	—	2	—	1	1	—	—
1922	44	—	5	2	4	1	1	—	—	—	—	—	1	—
1923	8	1	7	3	—	—	—	—	1	—	—	—	—	—
1924	2	—	5	—	—	—	—	—	3	—	2	—	1	—
1925	15	—	4	2	—	—	—	—	1	—	1	1	1	—

ADOPTION OF NOTIFICATIONS—

Phthisis and Ophthalmia Neon., 1911.
 Poliomyelitis and Cerebo-Spinal, 1912.
 Other Tubercular Diseases, 1913.
 Measles and Whooping Cough, 1916.
 Pneumonia and Influenza.
 Malaria.
 Encephalitis Lethargica.

TABLE V.

TETTENHALL URBAN DISTRICT COUNCIL.

Summary of Sanitary Work in Inspector's Department
during 1924.

	No.	No. of Inspection.	Defects found.	Informal Notices Served.	Statutory Notices Served.	Defects Remedied
DWELLING HOUSES	1413	920	386	354	28	360
DAIRIES AND COWSHEDS ...	14	47	18	18	—	18
BAKEHOUSES	4	18	9	—	—	9
SLAUGHTERHOUSES	5	42	12	12	—	12
WATER CLOSETS	1686	360	72	60	6	72
PRIVY MIDDENS	123	290	26	17	6	26
CONVERTED TO W.C.'S ...	17	73	—	—	—	—
HOUSE DRAINAGE	—	231	156	150	4	156
WATER SUPPLY	—	32	11	11	7	11
SAMPLES WATER ANALYSED	4	—	3	3	—	3
OVERCROWDING	—	20	15	15	—	6
OTHER NUISANCES	—	221	72	60	—	60
TOTALS	—	2254	780	709	51	733

Houses Disinfected 35
 Schools „ 6

JOHN DENTON,

Assoc. R. San. Inst.,

Sanitary Inspector.

